



| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 2658-0317P | |
|---|----------------------------------|--------------------------------|-----------------------------|--------------------------|--------|
| Application No. 10/826,279-Conf. #9919 | Filing Date April 19, 2004 | Examiner P. J. Macchiarolo | | Art Unit 2875 | |
| Applicant(s): Sung Gap IM | | | | | |
| Invention: ORGANIC ELECTRO-LUMINESCENCE DEVICE AND FABRICATING METHOD THEREOF | | | | | |
| MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 32 | - 27 = | 5 | x 50 | 250.00 |
| Independent Claims | 3 | - 3 = | | x | |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 250.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ 250.00 is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
|  Dated: March 6, 2006 | | | | | |
| Scott L. Lowe Attorney Reg. No.: 41,458 | | | | | |
| BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000 | | | | | |



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 250.00)

| Complete if Known | |
|--------------------------|------------------------|
| Application Number | 10/826,279-Conf. #9919 |
| Filing Date | April 19, 2004 |
| First Named Inventor | Sung Gap IM |
| Examiner Name | P. J. Macchiarolo |
| Art Unit | 2875 |
| Attorney Docket No. | 2658-0317P |

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of Credit any overpayments
 fee(s) under 37 CFR 1.16 and 1.17

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|-------------------------|--------------------|------------------------------|--------------------|------------------------------|-------------------------|------------------------------|-----------------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

| | |
|---------------------|----------|
| Small Entity | |
| Fee (\$) | Fee (\$) |
| 50 | 25 |

Each independent claim over 3 (including Reissues)

| | |
|-----|-----|
| 200 | 100 |
|-----|-----|

Multiple dependent claims

| | |
|-----|-----|
| 360 | 180 |
|-----|-----|

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|----------------------|
| | | | | Fee (\$) | Fee Paid (\$) |
| 32 | - 27 = 5 | x 50.00 | = 250.00 | | |
| 3 | - 3 = | x | = | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|---------------------|---------------------|---|-----------------|-----------------------|
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
| _____ | - 100 = _____ | /50 (round up to a whole number) x _____ | = _____ | Fees Paid (\$) |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

| SUBMITTED BY | | | | | |
|-------------------|---|--------------------------------------|--------|-----------|----------------|
| Signature |  | Registration No. (Attorney/Agent) | 41,458 | Telephone | (703) 205-8000 |
| Name (Print/Type) | Scott L. Lowe | | | Date | March 6, 2006 |



Docket No.: 2658-0317P
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Sung Gap IM Conf.: 9919
Appl No: 10/826,279 Art Unit: 2879
Filed: April 19, 2004 Examiner: P. J. Macchiarolo
For: ORGANIC ELECTRO-LUMINESCENCE DEVICE AND
FABRICATING METHOD THEREOF

REPLY UNDER 37 C.F.R. § 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In reply to the Examiner's Non-Final Office Action dated December 6, 2005, the following amendments and remarks are respectfully submitted in connection with the above-identified application as follows:

- Amendments to the Specification;
- Amendments to the claims;
- Remarks/Arguments.

03/07/2006 SZEWDIE1 00000028 10826279

01 FC:1202

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